

# Tribal Loan

DO NOT WRITE IN THIS BOX

1) Name \_\_\_\_\_ Tribal ID \_\_\_\_\_  
 Address \_\_\_\_\_ DOB \_\_\_\_\_  
 \_\_\_\_\_ SS# \_\_\_\_\_  
 \_\_\_\_\_ Phone# \_\_\_\_\_  
 Previous Name if any \_\_\_\_\_  
 \_\_\_\_\_

Emergency Loan \_\_\_\_\_  
 Rehab loan \_\_\_\_\_  
 Tribal Loan \_\_\_\_\_  
 Cable \_\_\_\_\_  
 Housing \_\_\_\_\_  
 Utilities \_\_\_\_\_  
 Other \_\_\_\_\_

2) Amount Requesting \$ \_\_\_\_\_ (Max \$2,000.00)

3) How are you going to pay this loan back? (circle one)

- a) per capita                      b) Monthly payment of \$70.00  
 c) Payroll deductions from the  
     casino/ tribes/ housing/ utilities

\*\*\*\*\*  
 Total Deductions \_\_\_\_\_

Amount of Check \_\_\_\_\_

Approved by \_\_\_\_\_

**\*\* PLEASE NOTE if there is nothing marked we will  
 AUTOMATICALLY take your PER CAPITA.\*\***

Purpose for loan \_\_\_\_\_

Answer completely all of the following questions:

Name of Employer _____	Phone _____
Address _____	How long employed? _____
_____	Take home pay monthly _____
Other Income _____	Total amount per month _____

Do you presently owe money to others? { } yes (include tribal debts) { } no. If yes, list below:

Name of creditor	amount owed	monthly payments
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date:

**(Application must be signed and completely filled out or your loan will be turned down)**

**\*\*\*\* MUST BE NOTARIZED IF MAILED BACK TO THE TULALIP TRIBES  
 FINANCE STAFF OR IT WILL BE RETURNED TO YOU\*\*\*\***

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